
The Medical Library Association's professional development program: a look back at the way ahead*

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Objective: Reflecting patterns evident in past Janet Doe Lectures, the 2005 address reviews the Medical Library Association's (MLA's) professional development activities from their beginnings after World War II. A group of related but separate activities is traced through the establishment of an integrated professional development program. A further objective is to introduce newer members of MLA to their heritage and to remind others how the association has reached this point in its history.

Setting: The lecture provides an overview of the evolution of MLA's professional development program—with emphasis on certification and continuing education in the early years. It further reflects briefly on some of the more recent MLA activities that have greatly impacted professional development and underscores some new initiatives.

Analysis: The efforts of a virtual who's who of MLA's membership have been responsible for the convergence of the association's efforts over more than half a century to provide a comprehensive professional development program. As a participant in MLA's professional development activities for more than forty years, the 2005 lecturer provides a personal view of the growth and expansion of the program.

Conclusions: Professional development has been a hallmark of MLA for many years. The association's challenge is to continue to develop creative and innovative programs, to continuously review and revise existing programs, and to have the vision and vitality to maintain a viable program that will provide the membership with the knowledge and skills needed to function effectively now and in the future.

The Janet Doe Lectureship was established in 1966 by an anonymous donor who provided \$500 "to support a lecture at the Association's 1967 Annual Meeting in Miami, in honor of Miss Janet Doe, former librarian of the New York Academy of Medicine and editor of the *Handbook of Medical Library Practice*" [1] (Figure 1). Gertrude L. Annan, FMLA, who succeeded Janet Doe, FMLA, at the academy, did indeed present the first lecture at the Miami meeting, providing a thirty-year review of the Medical Library Association's (MLA's) history (Figures 2 and 3). Thus, began a remarkable series of lectures on the history or philosophy of medical librarianship.

* The Janet Doe Lecture on the history or philosophy of medical librarianship, presented at MLA '05, the 105th Annual Meeting of the Medical Library Association, San Antonio, Texas, on May 17, 2005; Rick Forsman, AHIP, FMLA, the 2004 Janet Doe lecturer, gave the introduction.

Since the inception of the Janet Doe Lecture in 1967, it has been both my pleasure and my privilege to attend all but two of the lectures. I have listened as our colleagues have shared with us their experience and wisdom. Some have helped us to understand *how* we have reached a particular point in time through their interpretation of the history of the events that have shaped and affected our professional lives. Others have helped us to understand *why* we may have reached that particular point by sharing their personal and professional philosophies. And still others, in their chosen topics, have very effectively merged both history and philosophy.

In her history of the Doe lectureships, Alison Bunting, AHIP, FMLA, captures beautifully, and, oh, so accurately, the reactions of the honoree: "The letter arrives without warning, instantly eliciting sensations of pride and pleasure at the singular honor which has been bestowed" [1]. As reality sets in, a wide range of

Figure 1

Portrait of Janet Doe, FMLA, ca. 1948, when she was librarian of the New York Academy of Medicine



emotions follows. Perhaps the primary one is a devout desire to measure up to the efforts of your predecessors!

It is very meaningful for me personally that I have been asked to give this year's Doe lecture in San Antonio. We have now had three annual meetings here, and each has been significant to me. In 1974, I gave my first MLA paper at the annual meeting in San Antonio. It was a history of our fledgling continuing education (CE) program that had just completed its first decade. I also chaired my first MLA committee for that meeting, the Continuing Education Committee. In 1994, we returned to San Antonio, and it was here, on May 17, 1994, that I became president of MLA and gave my inaugural address. Now, we are back on May 17, 2005, and I have the great honor of presenting the Doe lecture.

Many of the Doe lecturers have spoken of their difficulty in deciding on a topic. Virginia Holtz, AHIP, FMLA, said,

Selecting the topic for the Janet Doe lecture is an experience in and of itself. In my case, it took on tones of an exorcism. It was not so much that I chose a topic, but that I fulfilled a need to resolve a number of questions. [2]

Figure 2

Gertrude L. Annan, FMLA, the first Janet Doe lecturer



Choosing the topic was not a major problem for me. Although I considered a number of ideas, I always came back to professional development, which has been my principal MLA activity for over four decades. My involvement in this program began in the fall of

Figure 3

The first Janet Doe Lecture in 1967: Gertrude Annan, President Mildred Crowe Langner, FMLA, and Janet Doe



1963, when I was asked to teach a CE course on punched-card methods during the 1964 annual meeting in San Francisco. Since then, my activities have ranged from CE to credentialing to the publications program and, more recently, to *Platform for Change* and other library education assignments.

Preparing the Doe lecture has provided me with the opportunity to reflect on the progress of MLA's professional development programs, particularly in these past forty-two years. During that period, I have been privileged to observe the major expansion in the programs and to appreciate the efforts of a virtual who's who of MLA's membership.

This has also been a period of corresponding change and growth in medical libraries. Many of the resources that we take for granted today are, after all, relatively recent developments. Computer databases, integrated library systems, and personal computers do, for the most part, date from the early 1970s and 1980s. Many of us remember the time spent searching indexes and abstracts to compile a bibliography by hand. Indeed, the introduction of the copier in the library and the use of punched cards were major innovations at the time and immense timesavers for all of us. Thus, a challenge to our professional development program has been that of keeping up with the considerable changes taking place in the profession.

Today, I hope to provide you with an overview of how our professional development program has evolved—with emphasis on certification and continuing education in the early years—and to reflect briefly on some of the more recent MLA activities that have greatly impacted professional development as well as to underscore some new initiatives. We sometimes are not aware, particularly at the time, of the ripple effect an activity can have. If I am successful in my goals today, I hope to introduce our newer members to our heritage and to remind those of us who have been around for a while how we have reached this point in our association's history.

Professional development has been a hallmark of MLA for many years. For more than half of our existence as an association, we have been involved in the formal growth and expansion of our various professional development activities. In the early years, these activities were not necessarily termed "professional development," but rather were individual activities being carried out by various units of MLA. Nonetheless, they constituted professional development activities and contributed to our reaching today's stage.

I take a very broad view of the term, professional development. Often it is *equated* with continuing education. To me, professional development *includes* continuing education just as it includes credentialing, research and publications, formal education, and professional service. In short, it includes all of those aspects of a person's career that we acknowledge and value in MLA through our career recognition program, the Academy of Health Information Professionals, and through *Platform for Change*. Our concern in 2005 is not whether an individual has reached a certain standard

or level or threshold; rather, we focus on the achievements of the individual and how these achievements have enabled one to advance in one's career—indeed, to find the "way ahead."

Recognizing the changing needs of society and adapting to them are the major byproducts of a librarian's professional development. This on-going process begins with preservice education (indeed with the background a librarian brings to that education) and continues through retirement, because the conclusion of active service does not preclude the continuation of interest in the field. Unfortunately, the incentive and means for carrying out needed changes, both in society and for the individual, are not always present. MLA's recognition of its responsibility to provide opportunities for ongoing professional development has been applauded and emulated for many years.

Over these years, as we have developed our own components of professional development, we have come to realize that establishing partnerships with other associations, agencies, and institutions is the only realistic manner of providing our membership with an effective professional development program. Our major partners have been the National Library of Medicine (NLM), programs of library and information science education, and other associations. Although my focus today is primarily on the efforts of MLA, we must acknowledge our debt to all of our partners, particularly NLM, whose support has been so crucial.

At the time of MLA's fiftieth anniversary, in 1948, Mildred Jordan, longtime director of the A. W. Calhoun Medical Library at Emory University, reflected on the stages in the evolution of a profession and the progress made by MLA in its evolution [3] (Figure 4). It was her assertion that, since the organizing meeting in Philadelphia in 1898, "when so few accomplished so much, we have come far in our professional development, but several stages in our growth are still necessary before we can achieve the real professionalization begun a half-century ago" [3]. Since our fiftieth anniversary, we have taken many giant steps in professional development, and it is my intention today to reflect on that progress and to explore some of the ways that we have taken control of our professional future.

No one program can meet the needs of everyone, and MLA, for almost sixty years, has gradually moved toward that concept, as its professional development programs have evolved. I say gradually because MLA has officially been wrestling with the various elements of professional development since World War II. For us as health information professionals, however, the odyssey started long before then, in efforts outside of MLA, in library education.

CURRICULUM

Although the earliest library schools had begun operation by the end of the nineteenth century, few medical librarians had completed (or even attended) library school. In fact, of the four librarians who were

Figure 4
Mildred Jordan



Figure 5
Margaret Ridley Charlton



charter members of the Medical Library Association, only one, Margaret Ridley Charlton, had had library school work and that was a short summer course at Amherst College (Figure 5). In her presidential address to the 1949 annual meeting of MLA, Janet Doe traced the development of education for medical librarianship, pointing out that, as late as the 1920s, only a small number of library school graduates were in medical libraries [4]. Because of the specialized literature and special needs of the practitioners, researchers, and students, the belief was that "the only way to know medical library methods was to work in a medical library, and, for many years to come, the "technical workers" in medical libraries would depend on the apprenticeship method of education [4].

With the development of more library schools and as more trained librarians entered medical librarianship, attention was given to the possibility of special courses for medical librarians. In 1923, the University of Minnesota advertised a course of study for persons interested in hospital library service. It was never offered, due to a lack of applicants [4].

In 1953, in an address to the First International Congress on Medical Librarianship, Estelle Brodman, AHIP, FMLA, summarized the development of the first formal courses in medical librarianship [5] (Fig-

ure 6). After the abortive University of Minnesota attempt in 1923, the next steps were taken in 1937, again by the University of Minnesota: "part of a course on hospital (patients') libraries given at the University of Minnesota Division of Library Science was devoted to medical libraries" [5]. It was not, however, until 1939 that the first course devoted entirely to medical librarianship was offered by Thomas Fleming, FMLA, at Columbia University. The course emphasis was placed on medical bibliography. In 1946 (when Estelle Brodman took over the Columbia course), a broader emphasis included medical library administration, cataloging and classification, and acquisitions procedures. In her oral history, Estelle Brodman reminisced about the class and her students. She said, "that year in my class were Brad Rogers, Louise Darling, Jacqueline Felter, and Erich Meyerhoff. . . . It was the most interesting class I had ever taught. While I think you always learn when you're teaching, this was one time when I really learned an awful lot" [6].

The course at Columbia was the only full course available until Mildred Jordan's course at Emory began in 1951. In contrast, the MLA Web page today lists forty-nine schools in the United States and Canada offering formal instruction in medical librarianship.

Figure 6
Estelle Brodman, AHIP, FMLA



Figure 7
Mary Louise Marshall, FMLA



CERTIFICATION

When Mildred Jordan reflected on MLA's progress in professionalization in 1948, our credentialing program, which became a model for other associations, was still being debated and had not yet been approved by the membership. In 1941, Mary Louise Marshall, FMLA, had inaugurated at Tulane University the first medical library internships [7] (Figure 7). Her report on these internships, given in her presidential address to MLA at the 1946 annual meeting in New Haven, initiated action on the part of the association toward setting standards for medical librarians [7]. The most immediate result of her address was the appointment (after spirited discussion, as you might imagine) of a "Committee on a Training Program for Medical Librarians" [7]. At the next annual meeting in 1947, the committee recommended training at three levels, with a graded certification plan corresponding to the three levels:

- Grade I: library school training with work in library administration, medical bibliography, etc.
- Grade II requirements for grade I plus six months' experience under an approved librarian
- Grade III: training leading to an advanced degree or its equivalent [8]

After another long and heated discussion, approval was given for the training recommendation, but the certification plan was tabled until 1949, when it was adopted by only one vote. Mildred Jordan noted that the minority report and the spirited discussion could lead one to infer that there were those who believed that the association might indeed be opening Pandora's box [3].

Central to the certification program were courses in medical librarianship, but, as late as 1951, the only full courses existed at Columbia and Emory. The development of additional courses came about partly through efforts of the Veteran's Administration (VA). In 1949 and 1950, the VA arranged for intensive, short-term courses in medical librarianship to be taught at the University of Southern California, the University of Chicago, and the University of Illinois. These schools were the next accredited library programs to add full courses in medical librarianship to their curricula [9].

Subsequently, as new courses were developed and implemented, MLA developed a mechanism for reviewing and approving each course on a rotating five-year basis. In the 1949 code, certification at each of the three levels was based on completion of approved activities, rather than evidence of individual competency

Figure 8

The triumvirate: Eileen Cunningham, FMLA, Janet Doe, FMLA, and Mary Louise Marshall, FMLA



in the field. This method for certification was to continue until the 1970s.

Medical library education courses and medical library internships were very closely aligned in the new certification code, and it is impossible to discuss MLA certification without reviewing internships. Certification at grade II of the 1949 code depended on completing an approved internship as well as meeting the educational requirements. Indeed, it was Mary Louise Marshall's presidential address reporting on the Tulane internship that had ultimately forced the issue leading to the certification code of 1949 [4].

A second internship had begun at Vanderbilt, in 1944, under the guidance of Eileen Cunningham, FMLA. Both programs received retroactive approval for grade II certification in 1952 [8]. Thirteen individuals completed the Tulane program, and six completed the one at Vanderbilt. With the retirements of Eileen Cunningham in 1956 and Mary Louise Marshall in 1959, the Vanderbilt and Tulane internships closed. These two programs, however, set high standards for the later internships to emulate. It is perhaps no coincidence that both programs closed upon the respective retirements of their directors. In Mary Louise Marshall's obituary, Estelle Brodman noted,

With the death of Mary Louise Marshall... came the end of the Medical Library Association's *grande dames* of the mid-20th century. Eileen Cunningham, Janet Doe, and Mary Louise Marshall constituted a triumvirate that brought about so many fundamental changes in medical libraries and librarianship that all who work in this field now are legatees of this unusual group, whether they realize it or not. [10] (Figure 8)

No further internships were instituted until 1957, when NLM announced its training plan [11]. Recruitment needs were at the heart of this program, with the further hope that individuals who went through the

program would make significant contributions to the field as a whole, as had those who had completed the programs at Tulane and Vanderbilt. The association immediately granted approval for MLA grade II certification to NLM's program at the end of the first six-month trial period—the earliest that approval could be granted [11].

Following NLM in establishing internships in the early 1960s were the University of California, Los Angeles, Biomedical Library, the Emory University A. W. Calhoun Medical Library, and the National Institutes of Health (NIH) Medical Library. With the emphasis on research at NIH and with the two programs in academic medical libraries, all complementing the one at NLM, these four training programs offered a wide range of experiences for the beginning medical librarian.

With the passage of the Medical Library Assistance Act in 1965, training efforts were greatly expanded, with the addition of fellowships for specialized study in medical librarianship at the master's level and with increased availability of internships at the post-master's level. Six master's level programs and four additional internships benefited from the passage of this act [12].†

When federal funding for these programs was decreased during the 1970s, most of the programs could no longer afford to recruit participants. In his Janet Doe lecture, Erich Meyerhoff, AHIP, FMLA, commented, "Their discontinuance is a political fact and a contemporary tragedy" [13]. Only the NLM Associates Program has continued.

Louise Darling, FMLA, in her Janet Doe Lecture on the occasion of MLA's seventy-fifth anniversary, observed that certification in 1973 was "in many ways once more as far from being settled as it was in 1946 when Mary Louise Marshall introduced it at the Association's first post-World War II conference" [14]. Her statement reflected the more wide-ranging and comprehensive certification program that had been developed under her leadership and that MLA was then on the verge of approving (Figure 9).

The certification code was changed in 1973 to reflect a new competency-based examination in which individuals demonstrated their capability in the three areas of the examination: medical library reference, technical services, and administration. The new code focused on the three-part examination, and the examinee was required to achieve a passing grade on each part. No longer were courses in medical librarianship being reviewed and approved. The products of the courses, the students, received the emphasis. There were no longer levels of achievement—the old grades

† Master's degree programs added under the Medical Library Assistance Act (MLAA): Illinois Institute of Technology, Case Western Reserve University, University of California, Los Angeles, University of Chicago, University of Minnesota, and University of Southern California. Internship programs added under MLAA: Johns Hopkins University, University of Tennessee, Washington University at St. Louis, and Wayne State University.

Figure 9
Louise Darling, FMLA



I, II, and III—with permanent certification. Instead, one received certification upon successful completion of the full examination, and recertification was required every five years. This code, with revisions, was to remain in effect until 1989.

When asked in her oral history if she thought certification had assisted in improving the quality of medical librarianship, Louise Darling responded:

I think it's certainly been instrumental in keeping that goal in front of us. Whether the Association would have done all the things it's done—started its continuing education program, always have had education be a major interest—it's hard to say without the Certification Program. [15]

CONTINUING EDUCATION

In 1958, preceding the annual meeting, MLA sponsored twelve “refresher courses,” approximating the subjects covered in the *Handbook of Medical Library Practice*. Each participant had the option of choosing four courses, each of which met for approximately two hours. Although the courses were judged successful and were offered again in 1959 and 1960, the participants indicated that they would have liked to have the course offerings expanded and the subjects covered more extensively [16].

In 1962, Frank Bradway Rogers, FMLA, then president of MLA, appointed the first Committee on Continuing Education, under the able chairmanship of Estelle Brodman. Included in the membership of the newly formed committee was Erich Meyerhoff. This committee was charged with studying, planning, and arranging programs for the continuing education of medical librarians and ancillary personnel and with

making recommendations to the MLA Board from time to time as to other means by which the continuing education of medical librarians could be served [16]. Little did the board realize how many recommendations would indeed be made over the years or how extensive and far reaching the program would become!

The newly appointed committee spent two years examining possibilities for continuing education. One of the proposals was for a series of graded courses to be taken over a number of years; another was for standardization of what was taught; a third was for a peripatetic “school,” brought directly to the local area and the younger staff members, who often could not come to the association’s annual meeting [17].

Two courses in computer technology were offered at the 1964 meeting in San Francisco. One was a practical, task-oriented course, “CE 1, Basic Punched Card Principles for Librarians,” and the other was a theoretical seminar, “CE 2, Implications of Machines in Medical Libraries—Social, Economic, and Administrative.” With these two courses, offered to 198 registrants, the association’s present program of CE courses began [17].

Next, the committee concentrated on the development of courses to be offered on a cyclic basis. A pattern evolved that has continued with modifications to the present. As courses embracing the new technology and new developments in medical librarianship were added to the CE curriculum, syllabi were developed to be used in the courses to ensure more standardization. Although refinements have been made and courses are offered at MLA chapter meetings as well as in other venues and through many modes of delivery, the CE Committee members of the early 1960s would find many of the same challenges and opportunities if they were to sit in on today’s committee meetings.

Early committees did *everything* related to the production and presentation of a course—from development of the concept, to finding a course developer, to locating an appropriate site, to actually presenting the course, to maintaining participant records, to storing unused syllabi between meetings. A major change that would have been greatly welcomed by the early CE Committees is the shift in many responsibilities to the MLA headquarters staff through its professional development staff.

The first executive secretary of MLA, Helen Brown Schmidt, had been hired in the summer of 1961, and the office was established at 919 North Michigan Avenue in Chicago’s Playboy Building. Carla J. Funk’s early history of MLA headquarters told us:

During 1972/73, MLA also hired its first director of medical library education, Julie Virgo, and activity in the area of continuing education increased dramatically. Headquarters published a continuing education clearinghouse in *MLA News*, distributed course syllabi, organized management institutes, published a listing of courses in medical librarianship available at [American Library Association] (ALA)-accredited li-

brary schools and handled continuing education courses at the regional and local levels. [18]

Since that time, the CE program has continued to expand, and the role of headquarters staff has been absolutely crucial in that growth. As continuing education has been strongly tied to credentialing, both programs have grown and prospered from that relationship.

When asked to comment on MLA's work in continuing education, Janet Doe said the following in her oral history:

I can only generalize that I think it's the salvation of medical librarianship, but since I have been out the last twenty years, I don't know very much about the courses being taught, but I do know that they are essential to the continuation of the improvement of our profession. [19]

INTEGRATED APPROACH

For much of our association's life, there was no professional development program identified as such. Individual committees were responsible for areas such as review and approval of library school courses, development and administration of certification examinations, recertification, publications, honors and awards, and continuing education activities. While there was communication among and between the various committees and there were liaisons appointed from the MLA Board, there was no integrated professional development program.

The theme of the 1987 annual meeting, chaired by Carol Jenkins, AHIP, FMLA, was "Confluence: Source of New Energy." This, to me, very aptly describes what had been taking place during the 1970s and 1980s. Several activities had been put in place that gradually caused professional development to be viewed as a whole. Each activity, in its own way, impacted our professional development program.

Special working groups

During the 1980s, a succession of special working groups produced documents and recommendations that put into place the framework of today's professional development program.

Study Group on the MLA's Role in the Educational Process for Health Science Librarians. In 1980, the Study Group on the MLA's Role in the Educational Process for Health Science Librarians was appointed by the MLA Board to follow up on the results and discussions of the Allerton Invitational Conference on Education for Health Sciences Librarianship, which had been held the previous year. Chaired by Phyllis Mirsky, AHIP, FMLA, a board member and future president of MLA, the study group reviewed all of the aspects of the educational process and prepared position papers and recommendations for each aspect, ranging from recruitment to all levels of formal education to CE and certification [20].

The report, position papers, and recommendations became known as the *Mirsky Report*. The study group concluded that in each area of the formal educational process, MLA no longer had regular or formal relations with programs of library education, because the certification program no longer approved courses in health sciences librarianship [20]. In his Doe lecture reviewing education for health sciences librarianship, Robert Braude, AHIP, FMLA, noted that the response to the report was weak: "the response of the board was to receive the report, thank the study group, and appoint another group—a subcommittee of the board—to analyze and study the report, which itself was an analysis and study." He lamented that a major focus of activity on the part of dedicated individuals in the profession and MLA itself was reduced to little more than a brief report at the business meeting [21].

At the time, it did seem as if little resulted from the recommendations. I would argue, however, that, reviewed in 2005, almost twenty-five years after the *Mirsky Report* was submitted, it did indeed play a pivotal role in future educational activities of MLA. Whether deliberately or indirectly, many of the report's recommendations have eventually been put into place, and others are deserving of reconsideration.

Ad Hoc Committee on Professional Development. In 1982, President Nancy Lorenzi, AHIP, FMLA, appointed the Ad Hoc Committee on Professional Development to develop a conceptual integrated framework for MLA's professional development program [22]. The appointment of this ad hoc committee almost certainly was a direct result of the *Mirsky Report's* recommendations relating to continuing education, certification, and recertification.

In 1984, that committee, which I chaired, presented to the board a detailed plan containing very specific recommendations. Approved in December of 1984, that framework has been the impetus to enhance and expand many of MLA's professional development activities [22]. Implementation of the recommendations moved very quickly in some areas and has progressed at a very sedate pace in others—with much examination and reexamination of issues. In fact, it sometimes has seemed as if we are moving in molasses! In reality, quite a lot happened in a relatively short period of time. In response to the report and, indeed, to other activities that preceded it, a code of ethics was adopted; an expanded books program, with a volunteer editor, was put into place; new formats and technologies expanded an already successful CE program; an educational policy statement was produced and implemented; and a comprehensive system of professional recognition has been put into place.

Task Force on Certification and Recognition. Not unexpectedly, the most passion and interest focused on the recommendation related to the comprehensive system of recognition. Indeed, much of the association's energy has been spent in this area since Mary Louise Marshall introduced the concept in 1946. In response

to the ad hoc committee's report, a Task Force on Certification and Registration, chaired by Jo Anne Boorkman, AHIP, FMLA, was formed in 1984/85. The report of the task force, presented to the board in May of 1985, contained the guidelines that ultimately led to the creation of the present Academy of Health Information Professionals [23].

The existing Credentialing Committee was given the task of developing the specifics of the new recognition program as contained in the task force's recommendations. The report was received by the board at the midwinter meeting and was debated at the 1988 annual meeting. As Jo Ann Bell Wootten, FMLA, stated in her detailed history of MLA's credentialing program: "the description of the discussion as 'spirited' in the proceedings might be considered an understatement by many of those present" [23].

Of principal concern were changes in the education requirements and eligibility. Only individuals with degrees from ALA-accredited programs were eligible to apply for certification under the 1949 and 1973 certification codes. By 1988, however, professional staff members included many individuals with a variety of master's degrees, and the program presented to the board and to the membership at the 1988 annual meeting broadened the eligibility requirements to reflect the existing situation. Eligibility was to be based on holding a post-baccalaureate degree in a relevant discipline [23].

Feelings were so intense during the ensuing discussions that a motion was passed at the business meeting delaying the approval and implementation of the new program until the membership could provide additional input. A revised program, taking into account many of the concerns expressed by the membership, was approved by a mail ballot in October of 1988. Thus was the Academy of Health Information Professionals created [23].

Dropped from the original program was the broad statement of eligibility that simply required a post-baccalaureate degree in a relevant discipline. It was not until 1993 that the educational requirement was changed to include either the master's degree from an ALA-accredited program or a master's degree from any program accredited by the Council on Post-Secondary Accreditation.

Our present Academy of Health Information Professionals differs from the previous certification program in several important respects:

- First and foremost, it provides for recognition at all levels of an individual's career, not just at the entry level.
- The eligibility requirement has been broadened to include individuals with master's degrees other than those accredited by ALA, so long as MLA's seven essential areas of knowledge have been addressed.
- It includes an individual's accomplishments in areas such as publications, honors and awards, education and continuing education, and service to the profession.

- It no longer contains a competency-based examination.

Implemented in 1989, the academy has as its central feature for membership the preparation and submission of a portfolio that provides documentation of academic preparation, professional experience, and professional accomplishments. Although the academy is often viewed as a significant departure from the earlier credentialing programs, the influence of these programs is quite evident [23].

Platform for Change

In May of 1989, in response to a number of different initiatives, President Eloise Foster, AHIP, FMLA, asked me to chair the Knowledge and Skills Task Force. First was MLA's own strategic plan, *Shaping the Future*, and the strategy to influence the curricula of academic institutions in the areas of design, development, and management of information systems [24]. To achieve this, it seemed necessary, first, to validate what health information professionals do and then to determine what they will need to do in the future.

A second impetus, closely related to the first, was the revision then underway of ALA's standards for accreditation of master's programs in library and information science (LIS). As a part of that revision process, each of the major library and information science associations was asked to provide the ALA Committee on Accreditation with educational and other policy statements pertinent to the needs of that organization so that the statements could be shared with the educational programs.

The result of our work was to be an educational policy statement reflecting guidelines for LIS programs. The task force felt that the charge was too limited because it only dealt with introductory-level library education. We were concerned that the needs of the full range of our members should be addressed. This seemed particularly pertinent in light of the new credentialing program that had just been implemented. Accordingly, we planned and submitted a statement that could fulfill the specific charge from the board and could benefit members at all stages of their careers.

MLA's educational policy statement, *Platform for Change*, was adopted by the MLA Board of Directors in December of 1991 [25]. The document described the need for lifelong interdisciplinary learning for the field, provided concrete guidelines for graduate programs, and acknowledged the need for a strong continuing partnership between MLA and NLM in attaining the goals of the document.

Perhaps the philosophy of *Platform for Change* is best exemplified by Estelle Brodman's exhortation to the 1979 Allerton Invitational Conference:

We must educate for the problems of a generation hence, not for the problems of today. . . librarians must be imbued with the psychological ability to handle change and to live with ambiguity. Without this they will be performing tomorrow's tasks with yesterday's concepts. [26]

Using Scientific Evidence To Improve Information Practice

MLA's research policy statement, *Using Scientific Evidence To Improve Information Practice*, builds on and complements *Platform for Change* and, as such, is an integral part of our professional development activities. Guided by the strategic plan of the association, it is based on a "vision of health information management practice whose core consists of verified scientific evidence, with LIS professionals as creators, managers, and active users of such evidence" [27]. This document does not include a "laundry list" of research topics; rather it provides an intellectual basis and rationale for the role of research in support of professional practice. Like the strategic plan and *Platform for Change*, the statement is addressed to a far-reaching audience that includes MLA members, library and information science educators, administrators, health care professionals, researchers, and policy makers.

The vision of the task force, chaired by Prudence Dalrymple, AHIP, seeks for excellence in the profession, for new and expanded roles for health sciences librarians, and for attraction of top people to the field. Collaboration with other groups, agencies, and institutions is again an integral part of the document.

AGAIN A TIME OF CHANGE

It is once again a time of change in our professional development program. Mildred Jordan would be pleased that, in the new millennium, we have new initiatives underway that should significantly strengthen and advance our association.

Next steps

Center of Research and Education Task Force. Since 2003, the Center of Research and Education (CORE) Task Force has been developing a bold new concept to provide high-quality information and resources that meet the educational needs of health information professionals anywhere, anytime [28]. Chaired by Connie Schardt, AHIP, this task force envisions making CORE MLA's repository of our quality educational content. The goal is to enhance the educational enterprise of MLA by providing access to quality content, services, and expertise that support lifelong teaching and learning. As is the case with our other educational enterprises, partnership is key. I recommend that you visit the CORE Website on MLANET to see what is already underway and what is planned for the future. Their report to the board will be another step forward in our lifelong learning efforts.

Review and revision. President Joanne Gard Marshall, AHIP, FMLA, has appointed two task forces to review and revise MLA's education and research policy statements. The Education Policy Task Force, chaired by Rick Forsman, AHIP, FMLA, will review *Platform for Change* in light of our changing educational environment, anticipating a strategic statement of

MLA's approach to education. The Research Policy Task Force, chaired by Suzanne Grefsheim, will review *Using Scientific Evidence To Improve Information Practice* in light of changing member needs and trends in evidence-based practice, anticipating again a strategic statement of MLA's approach to research. Each task force will explore the impact of its work on the structure and content of MLA's current and future programs.

Both of these statements will be considered at the Open Forum on MLA Education and Research Policy Statements for the Future on Wednesday afternoon, May 18, 2005. I urge you to attend and share your hopes and concerns with these task forces. This is your future and your opportunity to shape the "way ahead."

CONCLUSIONS

My goals, today, have been to provide you with an overview of the growth of our professional development program and a recognition of how much effort it has taken on the part of so many people. It is important for us to remember how their contributions have so considerably affected our professional lives. I have only touched on some of the major figures who took leading roles, and I am sure that many of you are asking yourselves, "Why didn't he mention this one or that one?" Be assured that these acts of omission were inadvertent.

Perhaps in the past we have set for ourselves the unrealistic goal of trying to provide the *ideal* professional development program. At this meeting, we are celebrating the diversity of our membership. Our continued goal, as we review and refine and refresh our professional development program, should be to craft a program that is *ideal for its purpose*, with the flexibility to meet the diverse needs of our members.

Our challenge is to ensure that we continue to develop creative and innovative programs such as CORE; that existing programs are continuously reviewed and revised; that adequate communication takes place among the various components of professional development; that the MLA Board and the membership have the vision and vitality to maintain a viable program that will indeed provide us with the knowledge and skills needed to function effectively now and in the future; and that we, the membership, continue to discuss, to dispute, and to question what is, after all, our "way ahead."

I am grateful to you for giving me this opportunity to walk down memory lane. More importantly, I hope that today's talk has allowed all of you who have made and are making the programs happen to reflect on and to be very proud of what *you* have done. The evolution of our professional development program is truly a collective and collaborative effort that will continue to parallel the overall growth and development of the Medical Library Association. It will ensure that both the association and the members have a *Futuro Magifico*! Thank you.

REFERENCES

1. BUNTING A. Excellence, promise, vision, and values: reflections on the Janet Doe Lectures, 1967–1997. *Bull Med Libr Assoc* 1998 Apr;86(2):258–66.
2. HOLTZ VH. Measures of excellence: the search for the gold standard. *Bull Med Libr Assoc* 1986 Oct;74(4):305–14.
3. JORDAN M. Certification: a stage of professionalization. *Bull Med Libr Assoc* 1948 Apr;36(2):108–16.
4. DOE J. The development of education for medical librarianship. *Bull Med Libr Assoc* 1949 Jul;37(3):213–20.
5. BRODMAN E. Education for medical librarians in the United States. *Libri* 1954;(3):205–13.
6. ZINN NW. Transcript of oral history with Estelle Brodman. 22 Nov 1978 and 10 May 1981.
7. MARSHALL ML. Training for medical librarianship. *Bull Med Libr Assoc* 1946 Oct;34(4):247–65.
8. LIBBEY MH. MLA certification: the certification program and education for medical librarianship. *Bull Med Libr Assoc* 1967 Jan;55(1):5–8.
9. MOHRHARDT F. Medical library training courses conducted by the Veterans Administration. *Bull Med Libr Assoc* 1951 Jul;39(3):177–81.
10. BRODMAN E. The end of the triumvirate: Mary Louise Marshall, 1893–1986 [obituary]. *Bull Med Libr Assoc* 1986 Jul;74(3):288–91.
11. DARLING L. Development of training programs in American medical libraries. *Bull Med Libr Assoc* 1963 Jul;51(3):339–53.
12. ROPER FW. Special programs in medical library education, 1957–1971: part II: analysis of the programs. *Bull Med Libr Assoc* 1973 Oct;61(4):387–95.
13. MEYERHOFF E. Foundations of medical librarianship. *Bull Med Libr Assoc* 1977 Oct;65(4):409–18.
14. DARLING L. The view behind and ahead: implications of certification. *Bull Med Libr Assoc* 1973 Oct;61(4):375–86.
15. BISHOP D. Transcript of oral history with Louise Darling. 7–8 Apr 1981. 118 leaves.
16. WITHROW BA. Continuing education of medical librarians: the Medical Library Association and continuing education. *Bull Med Libr Assoc* 1963 Jul;51(3):368–75.
17. ROPER FW. MLA continuing education activities, 1964–1974: a decade of growth and development. *Bull Med Libr Assoc* 1975 Apr;63(2):180–5.
18. FUNK CJ. Efficiency, stability, recognition, resolution [MLA headquarters in review]. *Bull Med Libr Assoc* 1998 Apr;86(2):289–91.
19. BRODMAN E. Transcript of oral history with Janet Doe. 20 Jul 1977. 9 leaves.
20. MIRSKY PS, chair. Report of the study group on the MLA's role in the educational process for health science librarians. *Bull Med Libr Assoc* 1983 Jan;71(1):117–21.
21. BRAUDE RM. On the origin of a species: evolution of health sciences librarianship. *Bull Med Libr Assoc* 1997 Jan;85(1):1–10.
22. AD HOC COMMITTEE ON PROFESSIONAL DEVELOPMENT, MEDICAL LIBRARY ASSOCIATION. Report to the board. In: *Medical Library Association. Annual report 1983/84*. Chicago, IL: The Association, 1984:61–78.
23. BELL JAH. History of the Medical Library Association's credentialing program. *Bull Med Libr Assoc* 1996 Jul;84(3):320–33.
24. MEDICAL LIBRARY ASSOCIATION. Shaping the future: MLA's strategic plan. Chicago, IL: The Association, 1987.
25. MEDICAL LIBRARY ASSOCIATION. Platform for change: the educational policy statement of the Medical Library Association. Chicago, IL: The Association, 1991.
26. BRODMAN E. Pragmatism and intellection in medical library education. In: Berk RA, ed. *Allerton invitational conference on education for health sciences librarianship*. Proceedings of a conference held at Monticello, IL, April 2–4, 1979. Chicago, IL: The Medical Library Association, 1979:viii.
27. MEDICAL LIBRARY ASSOCIATION. Using scientific evidence to improve practice. [Web document]. Chicago, IL: The Association, 2005. [cited 18 Apr 2005]. <<http://www.mlanet.org/research/science2.html>>.
28. MEDICAL LIBRARY ASSOCIATION. Center of research and education: CORE vision and mission (draft). [Web document]. Chicago, IL: The Association, 2005. [cited 18 Apr 2005]. <<http://www.mlanet.org/core/about.html>>.